

Project Name: Program for the Advancement of Commercial Technology /
Child and Reproductive Health (PACT/CRH)
Agreement Type: *Bi-lateral*
Duration: *1995-2007*
Geographic Scope: *National with focus on Uttar Pradesh, Rajasthan, Madhya Pradesh, Chhatisgarh, Uttarakhand, Bihar, Jharkhand, Delhi*
Technical Assistance Agencies: *Abt Associates & PATH*
Implementing Agency: *ICICI Bank*

DESCRIPTION:

PACT/CRH is a twelve-year \$29.8 million program implemented by the ICICI Bank, one of the largest financial institutions in India. PACT/CRH endeavors to increase use of reproductive and child health (RCH), and HIV/AIDS related products and services through the private sector.

The main objectives of this project are to:

- Introduce and commercialize new RCH and HIV/AIDS technologies.
- Improve quality and use of private sector, primarily commercial sector RCH and HIV/AIDS products and services.

KEY ACTIVITIES:

- Small grants for non commercial organizations;
- Concessionary loans for private firms;
- Technical support for new technologies, marketing, and quality control;
- Demand creation through commercial advertising, three projects have been initiated to promote WHO-ORS, low dose oral contraceptive pills and condom for dual protection; and
- Improvement of policy environment for commercial sector service delivery.

KEY ACHIEVEMENTS:

- Use of ORS among children with diarrhea has increased from 26% in 2001 to over 58% in 2005; and
- Use of oral contraceptive pills among urban women in targeted north Indian States increased from 4% in 1998 to 11% in 2003.
- Small grants to non commercial organizations and concessionary loans to private sector have been made to introduce and commercialize new RCH and HIV/AIDS technologies, and improve quality and use of RCH & HIV/AIDS products and services;
- Over 10 new technologies available in India including rapid diagnostics, Uniject, Vaccine Vial Monitors;
- Quality standards improved for condoms, IUDs and rapid diagnostics.

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Project Name: Private Sector Partnerships – One
Agreement Type: Field Support (Contract)
Duration: Oct 2004 – Sept 2009
Geographic Scope: Uttar Pradesh, Uttaranchal, Jharkhand, Bihar, Rajasthan, Delhi, Madhya Pradesh, Chhattisgarh,
Technical Assistance Agencies: Abt Associates
Implementing Agency: ICICI Bank

DESCRIPTION:

PSP-One or “Private Sector Partnerships-One” is a world-wide project funded by USAID as part of a wider USAID effort to meet health goals through private sector channels and decrease dependence on donors and government. PSP-One has a primary objective of providing leadership, innovation and technical direction concerning reproductive health and voluntary family planning (RH/FP) behaviors, products and services, and related health behaviors, products and services, in the private sector.

PSP-One India provides technical assistance (TA) to develop strategies for expanded marketing of health products and services to urban and rural areas through innovative channels, effective mass media and local communication, market research to better understand providers and consumers and monitor campaigns. PSP-One is a follow-on to the CMS (Commercial Marketing Strategies) project and endeavors to strengthen partnerships with commercial manufacturers and professional associations, on-ground support to train and detail chemists and health care providers, and coalition support for policy change.

KEY ACTIVITIES:

- TA for IFPS project for marketing of Oral Contraceptives, condoms, ORS, IFA tablets and Disposable Delivery Kits to rural UP statewide through the private sector;
- TA for the integrated marketing and communications efforts under PACT-CRH (WHO ORS and Zinc, condom category promotion campaign) plus on-ground support in urban areas of 10 states; partnerships with commercial manufacturers and others; and
- Provision of Injectables through the private sector in 19 cities of UP and Uttaranchal to promote correct use of DMPA and ensuring quality; integrated marketing with training of doctors and paramedics, local media, counseling of potential users, links and referrals through NGO's and public clinics, and private sector product supply channels.

KEY ACHIEVEMENTS OF ABOVE INITIATIVES:

- Increase in the percentage of target audience who know dual purpose messages increased from 76% in 2004 to 82% in 2005. Consistent use of condoms increased by 2%. Increase in sales volume of all commercial brands between 9% to 13%;
- Total urban sales of low dose OC's in North India increased by 48% in 5 years, while use of OC's among target audience increased from 4% to 11% (1999 to 2003). Shift to low dose OC formulation in policy and in market; Increased investment from private pharma companies on Oral contraceptives and their generic promotion; and
- ORS use for children with diarrhea increased from 26% in 2001 to 58% in 2005. Policy shift to new low osmolarity formula.

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Project Name: National Family Health Survey (NFHS)
Agreement Type: Multi DP support including USAID Field Support
Duration: 1992-2007
Geographic Scope: National
Technical Assistance Agencies: ORC Macro, PATH
Implementing Agency: International Institute for Population Sciences (IIPS), Mumbai

DESCRIPTION:

The National Family Health Survey (NFHS) is a large-scale, multi-round survey, conducted under the stewardship of the Ministry of Health and Family Welfare (MOHFW), Government of India (GOI). Funding for the 1992-93 survey (NFHS-1), the 1998-99 survey (NFHS-2), and the 2005-06 survey (NFHS-3) has been provided by the United States Agency for International Development (USAID), with additional funds for various rounds provided by UNICEF, DFID, the Bill and Melinda Gates Foundation, and UNFPA. The primary objectives of NFHS are:

- To strengthen India's demographic and health database by estimating reliable state-level and national-level indicators of population, maternal and child health, and nutrition.
- To facilitate evidence-based decision making in population, health and nutrition programs.
- To strengthen the survey research capabilities of Indian institutions
- To provide high quality data to policymakers, health and population program managers, government agencies, NGOs, PVOs, international agencies, and researchers.

KEY ACTIVITIES:

- The NFHS surveys have been conducted following the rigorous standards of the international Demographic and Health Surveys (DHS) program;
- These surveys have used uniform questionnaires, sample designs, field procedures and methods of biomarker measurement to facilitate comparability of the data and to achieve a high level of data quality; and
- These surveys are the outcome of an extremely successful collaborative effort of many organizations, led by the Ministry of Health and Family Welfare, GOI. The International Institute for Population Sciences (IIPS), Mumbai, has been the nodal agency for carrying out these surveys. ORC Macro, Calverton, Maryland, USA and its MEASURE DHS partners have provided technical assistance. The fieldwork has been carried out by more than 25 Indian research organizations, including Population Research Centers, academic institutions, and survey research firms.

KEY ACHIEVEMENTS:

- NFHS has created a comprehensive and reliable population and health database for India and its states, based on interviews with more than 400,000 adults and biomarker measurements conducted on more than 300,000 blood samples. Estimates provided by NFHS are considered to be the gold standard in India;
- NFHS data and the findings have been made widely available to program managers, policymakers, researchers, analysts, and the media through a variety of channels (reports, website, videos, wall charts, briefing books and CDs); and
- NFHS data have been extensively used for the formulation of India's Ninth and Tenth Five-Year Plans, the National Health Policy, the National Nutrition Policy, the Family Welfare Program, and for monitoring of RCH programs, developing India's Initiative to Eliminate Hunger, and improving the *anganwadi* program.

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Project Name: India Statistics Project/BUCEN
Agreement Type: *Field Support (Cooperative Agreement)*
Duration: *Ongoing since 1986*
Geographic Scope: *National*
Technical Assistance Agencies: *U.S. Census Bureau*
Implementing Agency: *Office of the Registrar General of India (ORGI), Delhi*

DESCRIPTION:

This project is part of a multi-year technical assistance and training agreement between the U.S. Census Bureau and the USAID to support the GOI, specifically, the Office of the Registrar General of India in its efforts to increase the availability of demographic and civil registration data in India. The major objective is to strengthen the country's institutional capability to generate and make available reliable demographic and civil registration data for population policy and program formulation, either through population censuses or surveys. It is designed to assist in improving ORGI's capability to collect, process, analyze, and disseminate high quality data in a timely fashion through the provision of expert technical assistance, training, and commodity support. The assistance is to strengthen the institutional capacity of ORGI whereby they will be able to repeat the statistical tasks on their own in the future.

KEY ACTIVITIES:

1. Improve the civil registration system, the collection of vital statistics, and the conduct of the sample registration scheme ;
2. Train staff in advanced demographic analysis, statistical methods, evaluation, and statistically related subjects;
3. Provide technical assistance in designing a post-enumeration survey for census evaluation.
4. Provide the training in basic principles of web site design and provide model formats in developing an ORGI Home Page for the purpose of data dissemination;
5. Provide an opportunity for high-level ORGI staff to discuss complex statistical and data collection problems with high-level U.S. Census Bureau staff in the U.S; and
6. Provide the latest in technical advice and training on computers and software to be more effective in speeding the processing of data.

KEY ACHIEVEMENTS:

1. Modernized the way ORGI produces and analyzes statistics which was mainly a manual operation to a computerized modern day operation in collecting, processing, and analyzing data;
2. Successful development of a dynamic national Civil Registration System of births and deaths which was officially introduced after two years of testing and review by the state registrars;
3. Provided information and assistance in the latest technology in processing census and survey data using scanned questionnaires, automated editing programs, statistical quality control methods for the manual editing of field forms, Census and Survey Processing (CSPPro) software to process the data, and dual estimation procedures to evaluate the coverage and content of the Population Census; and
4. Trained staff in workshops and by using professional visits both in India and in the United States in sampling, data dissemination, CSPPro, quality control procedures, population projections, and other statistical and analytical topics.

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Project Name: MEASURE DHS/ORC Macro
Agreement Type: *Field Support (Contract)*
Duration: *1992-September 2008*
Geographic Scope: *National*
Technical Assistance Agencies: *ORC Macro and its MEASURE DHS partners*
Implementing Agency: *International Institute for Population Sciences (IIPS), Mumbai*

DESCRIPTION:

The MEASURE program is a coordinated effort to improve the collection, analysis and dissemination of data for use in planning, policymaking, managing, monitoring and evaluating population, health and nutrition programs. ORC MACRO under the MEASURE DHS project is helping USAID/New Delhi to identify data needs and to collect, analyze, translate, package, archive and disseminate data in forms that meets its needs.

ORC Macro has provided technical assistance for the 1992-93, 1998-99, and 2005-06 rounds of the National Family Health Survey (NFHS). NFHS is a large-scale, multi-round survey, conducted under the stewardship of the Ministry of Health and Family Welfare, Government of India. The primary objectives of NFHS are:

- To strengthen India's demographic and health database and the survey research capabilities of Indian institutions.
- To facilitate evidence-based decision making in population, health and nutrition programs.
- To provide high quality data to policymakers, health and population program managers, government agencies, NGOs, PVOs, international agencies, and researchers.

KEY ACTIVITIES:

1. Providing technical assistance to IIPS and more than 25 field organizations to conduct high-quality, national household surveys on population, health and nutrition throughout India;
2. Building the capacity of IIPS, research organizations, and other agencies to design and implement NFHS surveys, to process and analyze survey data, and to disseminate survey findings;
3. Producing field manuals, laboratory manuals, sampling manuals and training manuals to support the collection of household survey data;
4. Providing technical assistance in biomarker measurement, including testing blood for anemia, lead, and HIV; and
5. Conducting Benchmark Surveys to assess achievements of the IFPS project in Uttar Pradesh.

KEY ACHIEVEMENTS:

1. Provided technical assistance to IIPS and more than 25 field organizations in the design and implementation of three household surveys with more than 400,000 respondents;
2. Coordinated training of more than 3,000 field staff in NFHS-1, NFHS-2, and NFHS-3;
3. Provided training in sample design, questionnaire design, data analysis, and data dissemination;
4. Co-authored with Indian colleagues more than 50 NFHS reports and numerous articles in peer-reviewed journals;
5. Assisted in promoting the use of NFHS findings in national and state decision-making with regard to population, health, and nutrition policies and programs (such as India's Ninth and Tenth Five-Year Plans, the National Health Policy, the Family Welfare program, the RCH Program, the Initiative to Eliminate Hunger and the *anganwadi* program); and
6. Conducted more than 65 Benchmark Surveys in Uttar Pradesh.

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Project Name: Title II supported Development Assistance Program (DAP)

Agreement Type: Field Support (Cooperative Agreement)

Duration: 2002-2006

Andhra Pradesh, Arunachal Pradesh, Assam, Bihar, Chhattisgarh, Chandigarh, Dadra & Nagar Haveli, Gujarat, Goa, Himachal Pradesh, Jharkhand, Madhya Pradesh, Maharashtra, Manipur, Meghalaya, Mizoram, Nagaland, Orissa, Rajasthan, Tripura,

Geographic Scope: *Uttar Pradesh and West Bengal*

Technical Assistance Agencies: *FANTA & IFPRI*

Implementing Agency: *CARE/India and Catholic Relief Services (CRS)/India*

DESCRIPTION:

The Public Law 480 Title II resources are the largest element of development assistance administered by USAID in India. This program, implemented through CARE and Catholic Relief Services (CRS), reaches about 7.5 million poor women and children at the greatest risk of mortality, morbidity, and malnutrition in around 100,000 villages in several states of India. The objective of this program is to reduce the high levels of child malnutrition and mortality through integration of supplementary feeding with complementary health care services provided through Government of India (GOI) and non-governmental organization (NGO) resources.

KEY ACTIVITIES:

CARE's Integrated Nutrition and Health Project (INHP) works with the GOI's Integrated Child Development Services (ICDS), the world's largest integrated child survival outreach program equivalent to USG's "Head Start" program. It reaches about 6.5 million women and children in nine most food insecure states of India. The technical intervention package includes targeted supplementary feeding, childhood immunization, antenatal care, infant feeding, community-based newborn care, and vitamin A. The program approach of innovation, demonstration of best practices and their systematic replication through capacity building and partnership with government, community based organizations and other stakeholders is working well and has demonstrated encouraging results. The Title II program, particularly the CARE's program has recently undergone a major transition. Currently, local grain provided by various state governments is programmed along with the USG supplied Title II oil.

The CRS Title II program is implemented through a large network of around 2,500 social service organizations in 22 states and Union Territories reaching about one million beneficiaries especially from the scheduled caste and scheduled tribe communities. In addition to Safe Motherhood and Child Survival (SMCS) activities, CRS also supports agriculture, basic education activities, and humanitarian assistance programs including Mother Teresa's Missionaries of Charity and the Dalai Lama's institutions for the Tibetan Refugees..

KEY ACHIEVEMENTS:

The Title II program network provides USAID a unique platform for improving child survival and health services. Reproductive Health and HIV prevention activities have been layered on the INHP platform through a newly funded project called "Chayan". Chayan is being implemented in four of the INHP states, and Delhi.

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Project Name: Horizons Program
Agreement Type: Cooperative Agreement
Duration: 1997-2007
Geographic Scope: Global – focus on India below
Technical Assistance Agencies: -
Implementing Agency: Population Council (and partners)

DESCRIPTION:

Horizons is a team of US-based and international organizations working to prevent the spread of HIV/AIDS and mitigate its impact on individuals and communities. Directed by the Population Council and funded by the President's Emergency Plan for AIDS Relief through the United States Agency for International Development (USAID), the program designs, implements, and evaluates innovative service delivery strategies. Since 1997, Horizons has implemented a comprehensive research portfolio and is currently focusing on six clusters of research topics: 1) Prevention 2) Youth 3) Access to treatment, care, and support 4) Addressing the impacts of HIV/AIDS 5) Reduction of stigma and discrimination 6) Determinants of the epidemic and political responses

KEY ACTIVITIES:

In India, Horizons research during the first phase (1997-2002) has addressed such issues as documenting and developing measures for assessing effectiveness of STI/HIV prevention approaches among marginalized and vulnerable populations, reducing AIDS-related stigma and discrimination, scaling up continuum of care, documenting implementation of GIPA and, advocating for rights based response to addressing women's migration and trafficking. During the current phase (2002-2007) the following studies have been undertaken by the Horizons team:

- Assessment of adherence to treatment and sexual risk behavior among HIV positive patients receiving ART- a diagnostic study in Pune and Delhi;
- Building social capital as a strategy to reduce HIV Risk Behaviors Among Key Populations in Andhra Pradesh;
- Providing continuum of care for HIV-positive women post delivery in India (PMTCT Plus);
- Improving the hospital environment for PLHA and scaling up 'patient-friendly' hospital concept for improving the hospital environment in India; and
- Promoting equitable gender norms and positive masculinity, via group education and a lifestyle social marketing campaign, as a strategy to reduce sexual risk behavior and violence among male youth in Mumbai, Goa and rural UP.

KEY ACHIEVEMENTS OF ABOVE INITIATIVES:

- Better understanding of factors influencing adherence to ARV in private and public health settings. Recommendations for improving adherence to ARV;
- Group educational modules to promote positive masculinity and gender-related attitudes among young men in low-income communities developed;
- Indicators developed to measure gender attitudes in the Indian context;
- Indicators for measuring and assessing impact of community mobilization on reducing risk to HIV among vulnerable populations developed;
- Documented continuum of care model of YRG Care and strategies for scaling up;
- Pathways to Greater Involvement of People Living with HIV/AIDS (GIPA) and models/typology of involvement elucidated; and
- Reduction in AIDS-related stigma and discrimination in health care settings and achievement of 'PLHA-friendly' hospital environment.

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Project Name: Reproductive and Child Health, Nutrition and HIV/AIDS (RACHNA) Program
Agreement Type: Field support (Cooperative Agreement)
Duration: Oct. 2001- Sept. 2006
Geographic Scope: AP, Bihar, Chhattisgarh, Delhi, Jharkhand, MP, Orissa, Rajasthan, UP and West Bengal
Technical Assistance Agencies: BASICS II, JHU, Linkages, MOST
Implementing Agency: CARE India

DESCRIPTION:

Reproductive Child Health, Nutrition and HIV/AIDS (RACHNA) Program is implemented in 78 districts and 22 cities built on the platform of Title II funded Integrated Nutrition and Health Project (INHP). The RACHNA Program has two projects funded by USAID India. While the child health and nutrition interventions began in 2001, the Family Planning and HIV prevention interventions through a project called *Chayan* were integrated in 2002. RACHNA supports Government of India's Integrated Child Development Services (ICDS) Scheme, Reproductive and Child Health (RCH) program and National AIDS Control Program (NACP) in its operational areas with a package of reproductive, child health, HIV prevention and nutrition interventions. INHP reaches about 7 million women and children from 78 districts, while *Chayan* complements these efforts by promoting family planning (especially birth spacing) and generating awareness on of STI / RTI and HIV/AIDS in 29 districts and 22 cities.

KEY ACTIVITIES

- Support for Supplementary feeding to most vulnerable mothers and children through ICDS;
- In four out of nine INHP states, FP and HIV/AIDS prevention interventions were built on the INHP II platform. Targeted interventions among high risk behavior groups to prevent the transmission of STI and HIV in 22 cities;
- Systems engagement with Integrated Child Development Services (ICDS), Reproductive and Child Health (RCH), State AIDS Control Societies (SACS) to ensure focus on critical issues;
- Demonstration of successful models of behavior change for improved RCH and nutrition outcomes, especially cadres of skilled volunteers and community-based organizations to support and sustain behavior change;
- Capacity building and strengthening the systems of Government especially ICDS and RCH to replicate successful models across larger program areas;
- Improving access to quality RH services & supplies through social marketing and private sector partnerships; and
- Behavior change communication and life skills development among school and out-of-school youth to prevent transmission of STI and HIV in 22 cities.

KEY ACHIEVEMENTS:

- The second round of rapid assessment surveys conducted in a panel of eight districts showed a positive movement in the indicators related to newborn care. Practice of all five cleans during delivery has increased substantially (10-20 percentage point) in five states, with upward trends in other states. There are small improvements (5-10 percentage point) in other essential newborn care practices in most of the states;
- Immunization coverage has increased in three states by 5-15 percentage points, receipt and consumption of IFA increased in four states, receipt of supplementary nutrition improved for all categories in most states. There is a significant increase in the timely initiation of complementary feeding in four of the states with positive trends in other states;
- About 9,000 villages developed demonstration sites with successful models of behavior change. A good progress has been made in replicating INHP best practices in selected Phase I replication site. As of September 04, 50% of villages have a regular nutrition and health days and 36% are having trained volunteers called change agents;
- Partnerships developed to increase accessibility and availability of socially marketed supplies in demonstration sites where *Chayan* is operational. A total of 68,318 retail outlets have been identified and products placed in 30% of the demonstration sites and a large number of adjoining villages.

CONTACT INFORMATION:

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